BEST AVAILABLE COPY

								Application or Docket Number					
PATENT APPLICATION FEE DETERMINATION RECOF Effective October 1, 2001									000	186	54		
CLAIMS AS FILED - PART I (Column 1) (Column 2)								L EI	NTITY	OR	OTHER		
TC	TAL CLAIMS	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	28				RAT	Έ	FEE		RATE	FEE	
FOR			NUMBER FILED		NUMBER EXTRA		BASIC	FEE	370.00	OR	BASIC FEE	740.00	
TOTAL CHARGEABLE CLAIMS			28 _ minus 20=		* 8		X\$ 9	X\$ 9=		OR	X\$18=	144	
INDEPENDENT CLAIMS			4 - minus 3 =		* /		X42	X42=		OR	X84=	8¢	
MU	LTIPLE DEPEN	IDENT CLAIM P	RESENT				1140	+140=		OR	+280=		
* If	the difference	in column 1 is	less than zero, enter "0" in column 2			TOTA			OR	TOTAL	961		
CLAIMS AS AMENDED - PART II									******		OTHER		
		(Column 1)		(Colum		(Column 3)	SMA	LL	ENTITY	OR	SMALL	ENTITY	
AMENDMENT A		CLAIMS REMAINING AFTER AMENDMENT		HIGH NUM PREVIO PAID	BER DUSLY	PRESENT EXTRA	RAT	Έ	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
	Total	*	Minus	**		=	X\$ 9)=	, , 5	OR	X\$18=		
	Independent	*	Minus	***		-	X42	=		OR	X84=	,	
	FIRST PRESENTATION OF MULTIPLE D			PENDENT CLAIM		+140)=,		OŔ	+280=			
			-=				TO ADDIT. I	TAL			TOTAL ADDIT. FEE		
		(Column 1) (Column 2) (Column 3)									ADDII. FEET		
AMENDMENT B		CLAIMS REMAINING AFTER AMENDMENT		HIGH NUM PREVIO PAID	IEST BER OUSLY	PRESENT EXTRA	RAT	Ε	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
	Total	* .	Minus	**		=	X\$ 9)=		OR	X\$18=		
	Independent	*	Minus	***		=	X42	_			X84=	7	
₹	FIRST PRESENTATION OF MULTIPLE DEPE				CLAIM					OR	:		
							+140	200		OR	+280=		
							ADDIT.	TAL FEE		OR	TOTAL ADDIT. FEE		
	(Column 1) (Column 2) (Column 3) = CLAIMS HIGHEST										_		
AMENDMENT C		REMAINING AFTER AMENDMENT		NUM PREVI	BER OUSLY FOR	PRESENT EXTRA	RAT	Ε	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
	Total	*	Minus	**		' = <u> </u>	X\$ 9)=		OR	X\$18=		
	Independent	*	Minus	***		=	X42	=		OR	X84=		
	FIRST PRESE	ILTIPLE DEPENDENT		CLAIM		l							
	If the entry in colu	ımn 1 is less than t	he entry in col	umn 2. writ	e "0" in co	olumn 3.	+140			OR	+280=	ļ	
** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20." ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3." ADDIT. FEE										OR	TOTAL ADDIT. FEE		
	The "Highest Nur	nber Previously Pa	id For" (Total	or Independ	dent) is the	e highest numbe	er found in th	e ap	propriate bo	x in co	lumn 1.		